

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request:	8/24/05	2 Serial/Patent #	10/528989
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
	7 TOTAL AMOUNT OF REFUND	\$ 50.00	
8 TO BE REFUNDED BY:			
10 REASON:	Treasury Check		
Overpayment	Credit Deposit A/C #:		
Duplicate Payment	9 02-2448		
No Fee Due (Explanation):			
Fee Code, Correction			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: BAC		TITLE: _____	
SIGNATURE: BAC		PHONE: _____	
OFFICE: PCT/DO/EO		Refn. No: 08/24/05 BCAMPBEL 0013331000 Name/Number: 10/528989 PL: 504 \$50.00 CR	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: _____		DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B